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CONFIRMATION NO. 2612

Bib Data Sheet

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|--|---|-----------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>09/669,051   | <b>FILING OR 371(c)<br/>DATE</b><br>09/24/2000<br><b>RULE</b>   | <b>CLASS</b><br>424               | <b>GROUP ART UNIT</b><br>1655   | <b>ATTORNEY<br/>DOCKET NO.</b><br>31110-0002                            |
| <b>APPLICANTS</b><br>F. Nicholas Franano, Kansas City, MO;   |   |                                   |   |   |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/155,938 09/24/1999<br><b>** FOREIGN APPLICATIONS *****</b>  |   |                                   |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b><br><b>** 11/15/2000</b>  |   |                                   |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR<br/>COUNTRY</b><br>MO | <b>SHEETS<br/>DRAWING</b><br>6  | <b>TOTAL<br/>CLAIMS</b><br>47<br><br><b>INDEPENDENT<br/>CLAIMS</b><br>5 |
| <b>ADDRESS</b><br>42477  |   |                                   |   |   |
| <b>TITLE</b><br>METHODS FOR TREATING AN ARTERY OR VEIN IN A HUMAN SUBJECT  |   |                                   |   |   |
| <b>FILING FEE<br/>RECEIVED</b><br>839  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |